

## APPLICATION FORM

## TRANSFER STATION RESIDENT PASS

2016-2017 ESSEX, CONNECTICUT

Year Runs from October 1 to September 30

| To be completed by the applicant:                 |                          |              |             |
|---|--------------------------|--------------|-------------|
| MAILING ADDRESS: (P.O. Box Acceptable.)           |                          |              | DATE//      |
| 1 <sup>ST</sup> VEH. OWNERLAS                     | T NAME                   | _ FIRST NAME |             |
| 2 <sup>ND</sup> VEH. OWNERLAS                     | T NAME                   | FIRST NAME   |             |
| STREET ADDRESS (Or P.O. BOX)                      |                          |              |             |
| VILLAGE   | ZIP CODE                 | _            |             |
| TELEPHONE: HOME: () CELL: ()                      |                          |              |             |
| STREET ADDRESS IF DIFFERENT FROM MAILING ADDRESS: |                          |              |             |
| STREET ADDRESS                                    |                          |              |             |
| CITY  | STATEZIP CODE            |              |             |
| г   |                          |              | <del></del> |
|   | VEHICLE #1 - LIC PLATE # |              |             |
|   | VEHICLE #2 - LIC PLATE#  |              |             |

RESIDENT FEE: \$125/yr; SENIOR RESIDENT (65+): \$75/yr; CASH/CHECK/CREDIT CARD ACCEPTED

## **IF YOUR ARE A PROPERTY OWNER WITH TENANTS:**

THE COST IS THE RESIDENT FEE: \$125/yr; SENIOR RESIDENT (65+): \$75/yr. PLUS AN ADDITIONAL- \$25.00 PER UNIT/APARTMENT.

IF THIS IS A NEW APPLICATION IT MUST BE ACCOMPANIED BY PHOTO ID. THOSE WITH OUT OF STATE DOCUMENTATION MUST PROVIDE PROOF OF PERIODICAL RESIDENCY IN ESSEX. THANK YOU.

\*\*\*\*\*PLEASE NOTIFY TOWN OF ESSEX OF ANY CHANGE OF VEHICLE\*\*\*\*